

PTO/SB/22 (08-03)

Approved for use through 7/31/2008. OMB 0651-0031

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)
20136-00305-USRECEIVED
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JUN 18 2004

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In re Application of Roy C. (deceased), Flaker et al.

Application Number
09/588,351-Conf. #8116Filed
June 7, 2000For CIRCUIT AND METHODS TO IMPROVE THE OPERATION OF
SOI DEVICES

Art Unit 2815

Examiner J. A. Fenty

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- | | |
|---|-----------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ 110.00 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$ |

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$☐ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director has already been authorized to charge fees in this application to a Deposit Account.☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 09-0458

I have enclosed a duplicate copy of this sheet.

- I am the ☐ applicant/inventor.
☐ assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
☐ attorney or agent of record. Registration Number _____
☒ attorney or agent under 37 CFR 1.34(a).
 Registration number if acting under 37 CFR 1.34(a) 27,369

June 18, 2004

Date

(202) 331-7111

Telephone Number

Signature

George R. Pettit

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 1 forms are submitted.

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FAX TRANSMISSION

DATE: June 18, 2004

PTO IDENTIFIER: Application Number 09/588,351-Conf. #8116
Patent Number

Inventor: Roy C. (deceased), Flaker et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (703) 872-9306

FROM: CONNOLLY BOVE LODGE & HUTZ LLP
George R. Pettit

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Attorney Dkt. #: 20136-00305-US

PAGES (Including Cover Sheet): 5

CONTENTS: One Month Request for Extension of Time Under 37 CFR 1.136(a);
Notice of Appeal;
Transmittal;
Certificate of Transmission under 37 CFR 1.8; and
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PTO/SB/97 (12-97)

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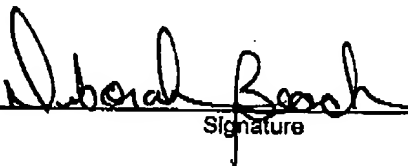
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PTO/SB/21 (02-04)

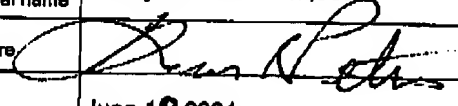
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<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>		Application Number	09/588,351-Conf. #8116
		Filing Date	June 7, 2000
		First Named Inventor	Roy C. (deceased) Flaker, et al.
		Art Unit	2815
		Examiner Name	J. A. Fenty
Total Number of Pages in This Submission	1	Attorney Docket Number	20136-00305-US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<div style="border: 1px solid black; padding: 5px; min-height: 100px;"> Remarks </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	CONNOLLY BOVE LODGE & HUTZ LLP George R. Pettit - 27.369
Signature	
Date	June 18, 2004